



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Waller	David	G.	543-4794
MAILING ADDRESS (Street)			FAX
P. O. Box 2750			543-4747
(City)	(State)	(Zip Code)	
Honolulu	HI	96840	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

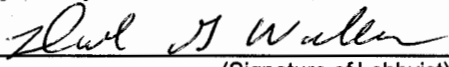
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		
Hawaiian Electric Company, Inc.		
TELEPHONE		
532-5860		
MAILING ADDRESS (Street)		
P. O. Box 2750		
FAX		
532-5864		
(City)	(State)	(Zip Code)
Honolulu	HI	96840
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		
Marcia Wright		
TELEPHONE		
532-5860		
MAILING ADDRESS (Street)		
P. O. Box 2750		
FAX		
532-5864		
(City)	(State)	(Zip Code)
Honolulu	HI	96840

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
X Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
X Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

12-29-04
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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Molly M. Egged

Secretary

NAME OF ORGANIZATION (if applicable)

Hawaiian Electric Company, Inc.

TELEPHONE

543-7728

MAILING ADDRESS (Street)

P. O. Box 2750

FAX

543-7523

(City)

Honolulu

(State)

Hawaii

(Zip Code)

96840-0001

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

1/31/05

(Date)